

Trafford Centre Mobility Registration Form

Title: Mr / Mrs / Miss / Ms / Other:

First Name:

Surname:

Date of Birth: / /

Address:

Post code:

Telephone Number:

Email:

- I certify that if I am advised at any stage that I should not use a scooter or power chair, I will inform Trafford Centre Mobility immediately.
- I confirm that that the scooter or chair is for the use of one person.
- I must drive with care and attention to pedestrians at all times.
- I must not use equipment on escalators or stairs.
- No children or pets are permitted to ride the scooter.
- I confirm that Trafford Centre Mobility staff have given me driver training.
- When using lifts I must ensure that the lift doors are fully open before entering or exiting.
- I will not manoeuvre the scooter inside lifts and I will drive straight in and straight out.
- I will remove the keys from the scooter when leaving it unattended on the malls and not leave it obstructing a fire exit.
- I will inform Trafford Centre Mobility staff of any faults, damage.

Signature:

Print Name:

Date: / /
